

## PART B - FEE(S) TRANSMITTAL



Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450



(571) 273-2885 or <u>Fax</u>

	CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.		
FITZPATRICK CELLA HARPER & SCINTO 30 ROCKEFELLER PLAZA NEW YORK, NY 10112 13/2006 MBEYENEZ 00000087 09891389				Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
				(Depositor's name)			
C:1501	1400.00 OP 300.00 OP 15.00 OP					(Signature)	
C:1504 C:8001						(Date)	
APPLICATION NO.	FILING DATE	I	FIRST NAMED INV	ENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
09/891,389	06/27/2001	Hiroyuki Kim		iura	35.C15501	4403	
APPLN, TYPE	SMALL ENTITY	ISSUE FE	EE T	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400	L	\$300	\$1700	03/06/2006	
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AZAD, ABUL K		2654 ee Address" (37 2. For printin		704-260000			
PTO/SB/47; Rev 03-02 of Number is required.  3. ASSIGNEE NAME AND	or (or "Fee Address" Indica or more recent) attached. Use RESIDENCE DATA TO Bl an assignee is identified be 37 CFR 3.11. Completion of	of a Customer E PRINTED ON T	listed, no name THE PATENT (pri			locument has been filed fo	
(A) NAME OF ASSIGNI	EE	(B	) RESIDENCE: (0	CITY and STATE OR COU	JNTRY)		
CANON KABU	SHIKI KAISHA		TOKYO,	JAPAN			
	assignee category or categor				orporation or other private gr	oup entity Governmen	
4a. The following fee(s) are enclosed:  4b. Payment of Fee(s)  A check in the				s): e amount of the fee(s) is en	closed		
				` '	edit card. Form PTO-2038 is attached.		
Advance Order - # of	Copies 5	<u></u>	The Director Deposit Account	is hereby authorized by cl Number <u>06-12</u>	harge the required fee(s), or 05 (enclose an extra of	credit any overpayment, to	
	(from status indicated above	•	□ b A1:	ana lamaan alaimina SMAI	LL ENTITY status. See 37 C	TED 1 27(~)(2)	
	MALL ENTITY status. See		• • •	-			
NOTE: The Issue Fee and Printerest as shown by the reco	is requested to apply the Issu ublication Fee (if required) words of the United States Pate	vill not be accepted ant and Trademark	I from anyone other	er than the applicant; a regi	stered attorney or agent; or t	the assignee or other party in	
Authorized Signature	Douglas W. C	Vendo		Date	February 10, 2	006	
	Douglas W. I	Pinsky		Registration	No. 46,994		

Alexandria, Virginia 22313-1450.

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